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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	EMCORE 3.0-069
	First Inventor	Alexander Gurary
	Title	REACTOR HAVING A MOVABLE SHUTTER
	Express Mail Label No.	EL804517375US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	ADDRESS TO: Box Patent Application Commissioner for Patents Washington, DC 20231
1 <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB 17) <small>(Submit an original and a duplicate for fee processing)</small> 2 <input type="checkbox"/> Applicant claims small entity status <small>See 37 CFR 1.27</small> 3 <input checked="" type="checkbox"/> Specification [Total Pages: 2] <small>preferred arrangement set forth below:</small> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing in table - Computer program listing appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4 <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets: 4] 5 Oath or Declaration [Total Pages:] a <input type="checkbox"/> Newly executed (original or copy) b <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>for continuation division with Box 16 completed</small> DELETION OF INVENTOR(S) Signed statement attached setting inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(c) 6 <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76	7 <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8 <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a <input type="checkbox"/> Computer Readable Form (CRF) b <input type="checkbox"/> Specification Sequence Listing on CD-ROM or CD-R (2 copies), or <input type="checkbox"/> paper c <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9 <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10 <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee)</small> Attorney 11 <input type="checkbox"/> English Translation Document (if applicable) 12 <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13 <input type="checkbox"/> Preliminary Amendment 14 <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>Should be specifically itemized:</small> 15 <input type="checkbox"/> Certified Copy of Priority Document(s) <small>if foreign priority is claimed</small> 16 <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i) Applicant must attach form PTO/SB 35 or its equivalent 17 <input checked="" type="checkbox"/> Other Unexecuted Declaration


18 If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____

Prior application information: Examiner _____ Group, Art Unit _____

For CONTINUATION or DIVISIONAL APPS only The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

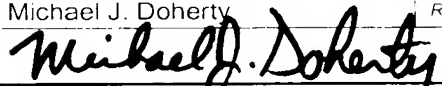
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Name (Print Type)	Michael J. Doherty	Registration No. (Attorney/Agent)	40,592
Signature		Date	January 16, 2002

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FEE TRANSMITTAL for FY 2002 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
<input type="checkbox"/> Application claims small entity status. See 37 CFR 1.27		Application Number	Not Yet Assigned
		Filing Date	
		First Named Inventor	Alexander Gurary
		Examiner Name	Not Yet Assigned
		Group Art Unit	N/A
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No.	EMCORE 30-069
956.00			
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Deposit Account		Large Entity Small Entity	
Deposit Account Number: 12-1095		Fee Code Fee (\$)	
Deposit Account Name: Lerner, David, Littenberg, Krumholz & Mentlik, LLP		Fee Code Fee (\$)	
The Commissioner is hereby authorized to: (check all that apply)		Fee Description	
<input checked="" type="checkbox"/> Charge fee(s) indicated below. <input checked="" type="checkbox"/> Credit any overpayments		Fee Paid	
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application			
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity Small Entity			
Fee Code Fee (\$)			
Fee Code Fee (\$)			
Fee Description			
Fee Paid			
101 740 201 370 Utility filing fee		740.00	
106 330 206 165 Design filing fee			
107 510 207 255 Plant filing fee			
108 740 208 370 Reissue filing fee			
114 160 214 80 Provisional filing fee			
SUBTOTAL (1) (\$)		740.00	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims 32 -20** = 12		Extra Claims Fee from below 18.00 = 216.00	
Independent Claims 3 -3** =		Fee Paid 0.00	
Multiple Dependent			
Large Entity Small Entity			
Fee Code Fee (\$)			
Fee Code Fee (\$)			
Fee Description			
103 18 203 9 Claims in excess of 20			
102 84 202 42 Independent claims in excess of 3			
104 280 204 140 Multiple dependent claims, if not paid			
109 84 209 42 ** Reissue independent claims over original patent			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$)		216.00	
** or number previously paid, if greater. For Reissues, see above			
SUBMITTED BY		Complete (if applicable)	
Name (Print Type): Michael J. Doherty		Registration No. Attorney Agent	40,592
Signature: Michael J. Doherty		Telephone	(908) 518-6337
		Date	January 16, 2002